

APPENDIX A

**Canton Public Schools
SUSPICION OF BULLYING & HARASSMENT REPORTING FORM**

Directions: The Canton Public Schools is committed to providing a safe environment for all members of our community. If you believe you have been the target of bullying or have witnessed bullying between two or more students, or by staff, complete this form and return it to your building Principal or a trusted member of the school staff. This form may be completed anonymously, but no disciplinary action will be taken against an alleged aggressor solely on the basis of an anonymous report. If you are concerned about anyone's immediate physical safety, call 911 or any adult in your school can help you right away.

Name of Reporter:

Date of Report:

I am (check one): Complainant (target of harassment/bullying) Reporter (not the target)

Check whether you are a: Student Staff member (specify role): _____

Parent Administrator Other (specify): _____

My Phone:

My Email:

Information about the Incident

Name of the target of bullying/harassing behavior:

Age:

Grade:

School:

Name(s) of alleged aggressor(s) (if known):

Age:

Grade:

School:

Dates/Times when incident(s) occurred:

Where did the incident(s) happen? (choose all that apply)

- On school property Online/via technology Other: _____
- On a school bus On the way to/from school
- At school-sponsored activity Event off school property

Please provide a written description of what happened (Use the back of this form if necessary):

What is the relationship of the alleged target to the alleged aggressor?

Witnesses (List of people who saw the incident or have information about it)

- | | | | |
|-------------|---|--------------------------------|--------------------------------------|
| Name: _____ | <input type="checkbox"/> Canton Student | <input type="checkbox"/> Staff | <input type="checkbox"/> Other _____ |
| Name: _____ | <input type="checkbox"/> Canton Student | <input type="checkbox"/> Staff | <input type="checkbox"/> Other _____ |
| Name: _____ | <input type="checkbox"/> Canton Student | <input type="checkbox"/> Staff | <input type="checkbox"/> Other _____ |
| Name: _____ | <input type="checkbox"/> Canton Student | <input type="checkbox"/> Staff | <input type="checkbox"/> Other _____ |

Signature: _____

Date: _____

ADMINISTRATIVE USE ONLY

Date Received: _____ Received By: _____

Action Taken:

APPENDIX B

Canton Public Schools

BULLYING & HARASSMENT INVESTIGATION FORM

- “ Suspicion of Bullying Reporting Form Attached
- “ Relevant Documents/Tangible Evidence Attached
- “ Interim Measures are in Place for Target/Victim

Part 1: Investigation

Investigator (name and position):	Investigation Start Date:
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Investigation

- “ Review discipline and school records (include IEP, 504s)
- “ Consult as needed with additional staff (e.g. SPED Liaison, counselor, nurse).
Include names here:
- “ Determine which additional staff, if any, needs to be present during student interviews and/or decision process.
Include names here:
- “ Conduct Interviews: *(conduct interview separately; inform those being interviewed of the purpose of the interview, the need to be truthful, and the prohibition against retaliation; obtain written statements when possible)*

Interviewed Reporter	Name:	Date:
Interview Alleged Aggressor(s)	Name:	Date:
	Name:	Date:
Interviewed Target(s)	Name:	Date:
	Name:	Date:
Interviewed Witness(es)	Name:	Date:
	Name:	Date:
	Name:	Date:
	Name:	Date:

Notes:

Any Prior Documented Incidents by the alleged aggressor?	“ Yes	“ No
If yes, have incidents involved target or target group previously?	“ Yes	“ No
Any previous incidents with findings of bullying, harassment or retaliation?	“ Yes	“ No

Harassment/bias indicators present:

<ul style="list-style-type: none"> “ Bias-related oral slurs; gestures “ Bias-related written or electronic comments or markings, drawings, graffiti, symbols “ Incident occurred on a holiday or date of significance to target or target group “ Animosity exists between alleged perpetrator's and target's groups 	<ul style="list-style-type: none"> “ Location of incident indicates bias “ Target perceives incident as motivated by group membership “ Target belongs to a group that is relatively small in number in school “ Hate group involvement “ Other: _____
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Nature of Bullying/Harassment

Severe (may happen in one episode if it involves a particularly offensive comment or some sort of physical touching)

Pervasive (involves less serious conduct that happens frequently over a long period of time.)

Persistent (constantly repeated/cont.)
 Other
 None/Not Applicable

SUMMARY OF INVESTIGATION (Attach relevant documents and tangible evidence reviewed)

Possible Evidence:

- Print-outs of blog posts, social networking pages, emails, etc.
- Copies of written statements
- Police Report(s)
- Nurse Report(s)
- Video Surveillance (if available)
- Information from prior investigations involving the same parties
- Other:
- Other:
- Other:

Part 2: Conclusions from Investigation

Bullying is when a person is exposed, repeatedly, and over time, to negative/harmful actions by one or more other persons.

Harassment is defined as unwelcome conduct, whether verbal or physical, that is based on race, national origin, sex, gender expression, sexual orientation, religious beliefs, disability or age.

Retaliation is defined as any form of intimidation, reprisal, or harassment directed against a student who reports bullying, provides information during an investigation of bullying, or witnesses or has reliable information about bullying.

Sexual Harassment is defined as unwelcome sexual advances, requests for sexual favors, and verbal or physical conduct of a sexual nature with the purpose or effect of unreasonably interfering with an individual's academic performance by creating an intimidating, hostile, humiliating or sexually offensive school environment.

• Check all that apply:

- **Repeated** use by one or more students/staff of a written, verbal or electronic expression or a physical act or gesture or any combination thereof, directed at a target that: (must include at least one of the following)
 - Causes **physical or emotional harm** to the target or damage to the target's property;
 - Places the target in **reasonable fear of harm to himself or herself** or damage to his/her property;
 - Creates a **hostile environment** at school for the target;
 - **Infringes on the rights** of the target at school; or
 - Materially and substantially **disrupts the education process** or the orderly operation of a school
 - *Involves an imbalance of perceived or real physical or social power between target and aggressor(s)*
 - *Retaliation from reporting of previous incident*

• Finding of Bullying, Harassment or Retaliation: • Yes • No

• If Harassment, type of harassment:

- Race/Color • Disability • Age • Sexual Orientation
- National Origin/ • Religion • Sex • Gender Identity or Expression
- Ancestry

• Finding of Other Behavioral Infractions (describe):

- “ Police Notified “ Yes “ No

- “ Special Education Status
 - Is alleged target or aggressor on 504 plan or IEP? “ Yes “ No
 - If yes, was 504 Coordinator or Team Chair notified? “ Yes “ No

- “ Provide a Final Determination
 - “ Incidents **did not** meet the definition of bullying
 - “ Conduct of concern will be addressed by principal or designee
 - “ Bullying/Harassment/Retaliation **has occurred** and will be addressed by principal or other designee
 - “ Criminal bullying has occurred and police have been notified due to possible criminal charges.

Part 3: Safety Planning / Actions Taken

If bullying, harassment or retaliation is found, apply appropriate disciplinary, corrective and remedial action to stop the behavior, prevent its reoccurrence and remedy the effects of the behavior on the target and the school.

Remediation Actions:

- “ **Behavioral Remediation Agreement** attached (if applicable)
- “ **Individual Behavior Plan** attached (if applicable)
- “ **Other** (*check or describe*)
 - “ Community Service “ Loss of Privileges
 - “ Counseling (for aggressor) “ Limitation of Extracurriculars
 - “ Education/Training “ Suspension (dates excluded: _____)
 - “ Staff: written reprimand, suspension or termination
 - “ Other: _____

Student/Staff Safety Actions:

Scheduled follow-up with Target: _____

Notification and Documentation

- "" Parent(s)/Guardian(s) of the target *Date:* *Person Contacted:*
- "" Parent(s)/Guardian(s) of student aggressor *Date:* *Person Contacted:*
- "" School Information systems *Date:* *Person Contacted:*
- "" School alert system (if necessary) *Date:* *Person Contacted:*
- "" Counselor of target *Date:* *Person Contacted:*
- "" Counselor of aggressor *Date:* *Person Contacted:*
- "" Special Education (for those on 504 plan or IEP and repeat offenders)
- "" Law Enforcement/SRO (if conduct may result in criminal charges)
- "" Other schools, coaches, and staff members (as appropriate) for implementing the disciplinary, remediation, and student safety actions. Please describe.

NOTES:

Administrator/Investigator Signature

Date:

APPENDIX C			
Canton Public Schools			
CONSEQUENCES OF BULLYING*			
Disciplinary Actions		Remediation Actions	Target Safety
Admonishment, various warning(s)		Meetings with parents	Strategies on how to seek support and network
Temporary removal from the classroom		Counseling	Clarification about who will be notified
Loss of privileges		Education including strategies to avoid repeating behavior.	Notify staff about incident and danger of further contact
Classroom or administrative detention		Academic and nonacademic positive behavioral supports	Strategies to respond if being bullied (script, role playing, etc.)
In-school suspension during the school week or the weekend		Revision of IEP, if applicable	Identifying trusted adults and "safe areas"
Out-of-school suspension		Remediation Agreement or Individual Behavior Plan	Education about rights to be free of retaliation and reasonable expectations about social consequences for being part of a bullying investigation (people will talk about it, but they may not retaliate)
Referral to Law Enforcement		Referral to Special Education (for conduct that may be related to a disability)	Periodic check-ins
Consequences for repeat offenses			Whole community meetings
Expulsion			Identification and empowerment of bystanders
Written Warning, Suspension or Termination (staff)			Education about technology

* NOTE: The above list is not exhaustive. Action will be taken that is appropriate under the circumstances. Aggressors can be required to undergo counseling with an in-house counselor (i.e., authorized school staff) as part of their remediation agreement or behavior plan.

1. Notify the aggressor of his or her rights and the process to appeal your decision
2. Meet with the target and/or witnesses (others involved) to develop a safety plan

Notification

Notify parent(s) or guardians(s) of the target(s) and aggressors(s), if student(s), about the determination and to the extent allowed by federal and state laws, actions taken to prevent reoccurrence of behavior.